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7590

10/24/2006

John S. Egbert Harrison & Egbert 412 Main Street, 7th Floor Houston, TX 77002

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Andrew	W. Chu	(Depositor's name)
Anh		(Signature)
24 Nov	2006	(Date)

			<u>×</u>	whom			(Signature)		
				24 Nov	2006		(Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR			RNEY DOCKET NO.	CÖNFIRMATION NO.		
10/792,025	03/03/2004		Edward L. Galloway			1779-10	1354		
TITLE OF INVENTION	: LOAD-CONTROLLE	D DEVICE FOR A PAT	TERNED SKIN INCISION	Í					
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID I	SSUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	· NO	\$1400	\$300	\$0		\$1700	01/24/2007		
EXAMINER		ART UNIT	CLASS-SUBCLASS	ASS-SUBCLASS					
SONNETT, K	ATHLEEN C	3731	606-167000	•					
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the p						
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			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.									
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	e)					
PLEASE NOTE: Unl recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the pa T a substitute for filing an	itent. If an as issignment.	signee is id	lentified below, the de	ocument has been filed for		
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Helena I	Helena Laboratories Beaumont, Texas								
Please check the appropriate assignee category or categories (will not be printed on the patent): 🗀 Individual 🛂 Corporation or other private group entity 🗀 Government									
4a. The following fee(s)	are submitted:	4	b. Payment of Fee(s): (Plea	se first reapp	ly any prev	olously paid issue fee:	shown above)		
Issue Fee			A check is enclosed.						
			Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 080879 (enclose an extra copy of this form).						
Advance Order - 1	# 01 Coptes		overpayment, to Depo	sit Account Nu	imber 08	0879 (enclose a	n extra copy of this form).		
5. Change in Entity Sta	•								
🔲 a. Applicant claim	☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).								
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Authorized Signature	Ahr			Date	24 NO	v 2006	:		
Typed or printed name Andrew W.Chu			Registration No. 46625						

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